

APPENDIX G

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD044688935	2. Page 1 of	3. Emergency Response Phone 516-816-4786	4. Manifest Tracking Number 011980574 JJK		
5. Generator's Name and Mailing Address Arsynco, Inc. 4 Tri Harbor Court Port Washington, NY 11050		Generator's Site Address (if different than mailing address) 511 13th Street Carlstadt, NJ 07072					
Generator's Phone: 516-827-6000							
6. Transporter 1 Company Name Freehold Cartage, Inc.		U.S. EPA ID Number NJD054128184					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Chemtron Corporation 35850 Schneider Court Avon, OH 44011 USA		U.S. EPA ID Number OHD086060009					
Facility's Phone: 440-937-6348							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. RQ, NA3077, Hazardous Waste Solid, N.O.S., 9, PGIII, (Toluene, Xylene)(U220, U239) ERG#171	20	DM	10000	P	U220 U239	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 9b.1) 20141015-020							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Joe Koch		Signature [Signature]			Month 11	Day 12	Year 14
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name [Signature]		Signature [Signature]			Month 11	Day 12	Year 14
Transporter 2 Printed/Typed Name [Signature]		Signature [Signature]			Month 11	Day 12	Year 14
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month	Day	Year

LAND DISPOSAL RESTRICTION NOTIFICATION & CERTIFICATION FORM (LDR)
CHEMTRON CORPORATION
35850 SCHNEIDER COURT, AVON, OH 44011
PHONE (440) 937-6348 FAX (440) 937-6845

PAGE 1 OF 1

GENERATOR NAME ARSYNCO, INC. EPA ID NUMBER NJD044688935
MANIFEST DOCUMENT NO. 011980574 JJK DATE 11/12/14
SIGNATURE [Signature] PRINT NAME Steve Kosch (Agent for Generator)

PLEASE REFER TO INSTRUCTIONS FOR IMPORTANT INFORMATION AND CODES FOR UHC'S AND CERTIFICATION

COMPLETE ALL APPLICABLE ITEMS.

LINE NO.	APPROVAL NO.	EPA WASTE NO.(S)	NWW	WW	SUBCAT.	UHC'S	CERT.
96.1	20141015-020	U220, U239	X				A.

FOR F001-F005 SPENT SOLVENTS, LIST THE NUMBER NEXT TO THE CONSTITUENT THAT IS PRESENT.

LINE NO.(S)	F001-F005 SOLVENT	LINE NO.(S)	F001-F005 SOLVENT	LINE NO.(S)	F001-F005 SOLVENT
	ACETONE		CYCLOHEXANONE		NITROBENZENE
	BENZENE		O-DICHLOROBENZENE		PYRIDINE
	N-BUTANOL		ETHYL ACETATE		TETRACHLOROETHYLENE
	CARBON DISULFIDE		ETHYL BENZENE		TOLUENE
	CARBON TETRACHLORIDE		ETHYL ETHER		1,1,1-TRICHLOROETHANE
	CHLOROBENZENE		ISOBUTANOL		1,1,2-TRICHLOROETHANE
	O-CRESOL		METHANOL		1,1,2-TRICHLORO-1,2,2-TRIFLUOROETHANE
	M-CRESOL		METHYLENE CHLORIDE		TRICHLOROETHYLENE
	P-CRESOL		METHYL ETHYL KETONE		TRICHLOROMONOFUO ROMETHANE
	CRESOLS/CRESYLIC ACID		METHYL ISOBUTYL KETONE		XYLENES (MIXED)

UHC'S OR "UNDERLYING HAZARDOUS CONSTITUENTS" ARE REGULATED WITHIN THE UNIVERSAL TREATMENT STANDARDS. GENERATOR'S ARE REQUIRED TO IDENTIFY THE UNDERLYING CONSTITUENTS IN WASTE WITH THE FOLLOWING EPA WASTE NUMBERS: D001 (EXCEPT D001 WASTES WHICH CAN BE TREATED BY CMBST), D002, D012-D043. FOR MORE INFORMATION REFER TO 40 C.F.R. PART 268.

Invoice: 122600

Receipt 02-00 540656

Manifest 011980626JJK

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD044688935	2. Page 1 of 1	3. Emergency Response Phone 516-816-4788	4. Manifest Tracking Number 011980626 JJK
5. Generator's Name and Mailing Address Arsynco, Inc. 4 Th Harbor Court Port Washington, NY 11050 Generator's Phone: 516-827-8000 Attn: SUZANNE TAIGANI		Generator's Site Address (if different than mailing address) 511 13th Street Carlsbad, NJ 07072			
6. Transporter 1 Company Name Freehold Cartage, Inc.		U.S. EPA ID Number NJD054128184			
7. Transporter 2 Company Name EQ Industrial Services		U.S. EPA ID Number MIK435C4C742			
8. Designated Facility Name and Site Address Michigan Disposal Waste Treatment Plant 49350 N. I-94 Service Drive Bellefonte, PA 16811 USA		U.S. EPA ID Number MID000724831			
Facility's Phone: 800-592-5489					
GENERATOR	9a. HWM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity
	X	1. RQ, NA3077, Hazardous Waste Solid, N.O.S., 9. PGIII, (Methylene Chloride, Toluene, Xylene) (U080, U220, U239) ERG#171	10	DM	4500 P
		2.			
		3.			
		4.			
13. Waste Codes U080 U220 U239 T					
14. Special Handling Instructions and Additional Information 9b.1) L142028MDI - Group 5 DRUMS (D WEN 6014)					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name STEVE KOSCH AS AGENT for Generator Signature Month Day Year 11/21/14					
INTL	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of embarkment: Date leaving U.S.:				
	Transporter signature (for exports only):				
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name Chris Roberts		Signature Month Day Year 11/21/14		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name RYAN RUSHMAN		Signature Month Day Year 11/16/15		
	18. Discrepancy				
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number:					
Facility's Phone:					
18c. Signature of Alternate Facility (or Generator) Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. 2. 3. 4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a					
Printed/Typed Name Mark Waksy		Signature M. Waksy		Month Day Year 01/12/15	

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

CERTIFICATE OF DISPOSAL



THE ENVIRONMENTAL QUALITY COMPANY 49350 N. I-94 SERVICE DRIVE BELLEVILLE MICHIGAN 48111

Form # REC-FM-02S-BEL

This certificate is to verify the wastes specified on Manifest # 011180626 JK

have been properly disposed of in accordance with all local, state and federal regulations.

"Disposed of" means either: 1) Burial or 2) Processed as specified in 40 CFR et seq.

FACILITY NAME:
(Please check one)



Michigan Disposal Waste Treatment Plant
(EPA I.D. # MID000724831)



Wayne Disposal, Inc.
(EPA I.D. # MID048090633)

ADDRESS:

49350 N. I-94 Service Drive
Belleville, Michigan 48111

PHONE NUMBER:

1-800-592-5489

FAX NUMBER:

1-800-593-5329

Authorized Signature: _____

Invoice: 122600

Receipt 02-00 540656

Cod COD #2

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number
2715-0381

2. Page 1 of 2

3. Emergency Response Phone

4. Waste Tracking Number

E0090111

5. Generator's Name and Mailing Address

ARS/INCO, INC.
511 137th STREET
CARLSTADT, NJ 07072

Generator's Site Address (if different than mailing address)

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

DAYSHORE SOIL MANAGEMENT LLC
75 CROWS MILL ROAD
KEASBEY, NJ 08832
732-738-6000

U.S. EPA ID Number

NJ1225001522

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. NON-HAZARDOUS PG SOIL

2.

3.

4.

13. Special Handling Instructions and Additional Information

BSM 2715-0381

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offor's Printed/Typed Name

Signature

Month Day Year

15. International Shipments

☐ Import to U.S.

☐ Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

☐ Quantity

☐ Type

☐ Residue

☐ Partial Rejection

☐ Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2715-0361		2. Page 1 of		3. Emergency Response Phone		4. Waste Tracking Number E0090112	
		5. Generator's Name and Mailing Address ARSYNCO, INC 511 13TH STREET CARLSTADT, NJ 07072		Generator's Site Address (if different than mailing address)					
Generator's Phone:									
6. Transporter 1 Company Name								U.S. EPA ID Number	
7. Transporter 2 Company Name								U.S. EPA ID Number	
8. Designated Facility Name and Site Address BAYSHORE SOIL MANAGEMENT LLC 75 CROWS MILL ROAD KEASBEY, NJ 08852 732-738-6000								U.S. EPA ID Number NJ1225001522	
Facility's Phone:									
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.				
		No.	Type						
1. NON-HAZARDOUS PC SOIL				25					
2.									
3.									
4.									
13. Special Handling Instructions and Additional Information BSM 2715-0361									
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.									
Generator's/Offeror's Printed/Typed Name Steve Kozlowski		Signature <i>[Signature]</i>				Month Day Year 5 14 11			
15. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: _____			
Transporter Signature (for exports only):		Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name BJS		Signature <i>[Signature]</i>				Month Day Year 5 14 11			
Transporter 2 Printed/Typed Name		Signature				Month Day Year			
17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
17b. Alternate Facility (or Generator)		Manifest Reference Number:				U.S. EPA ID Number			
Facility's Phone:									
17c. Signature of Alternate Facility (or Generator)						Month Day Year			
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name		Signature				Month Day Year			

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS
WASTE MANIFEST

1. Generator ID Number

2715-0361

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

E0090113

5. Generator's Name and Mailing Address

ARSYNCO, INC.
511 13TH STREET
CARLSTADT, NJ 07072

Generator's Site Address (if different than mailing address)

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

BAYSHORE SOIL MANAGEMENT LLC
75 CROWS MILL ROAD
KEASBEY, NJ 08832
732-738-6000

U.S. EPA ID Number

NJ1225001522

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

No.

Type

11. Total

Quantity

12. Unit

Wt./Vol.

1. NON-HAZARDOUS PC SOIL

21

2.

3.

4.

13. Special Handling Instructions and Additional Information

BSM 2715-0361

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

15. International Shipments

☐ Import to U.S.☐ Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

☐ Quantity☐ Type☐ Residue☐ Partial Rejection☐ Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

SHIPPING DOCUMENT	1. Generator ID Number N 3 D 0 4 4 6 8 8 9 3 5	2. Page 1 of 1	3. Emergency Response Phone 877-215-0037	4. Shipping Document Tracking Number ZZ 00439029				
5. Generator's Name and Mailing Address ARSYNCO INC 4 TRI HARBOR CT ATTN MICHAEL DIBELLO PORT WASHINGTON NY 11856			Generator's Site Address (if different than mailing address) ARSYNCO INC 511 12TH STREET CARLSTADT, NJ 07072					
Generator's Phone: 732 295-2144								
6. Transporter 1 Company Name VEOLIA ES TECHNICAL SOLUTIONS			U.S. EPA ID Number N 3 D 0 4 4 6 8 8 9 3 5					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address VEOLIA ES TECHNICAL SOLUTIONS LLC 1 EDEN LANE PLANDERS NJ 07834			U.S. EPA ID Number N 3 D 0 9 5 0 5 3 4 5 9 2					
Facility's Phone: 973 347-7111								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Codes	
		1. NON RCRA AND DOT NON REGULATED LIQUID	13 DM		5700	P	1072	
		2. NON RCRA AND DOT NON REGULATED SOLID	14 DM		7700	P	1077	
		3.						
		4.						
14. Special Handling Instructions and Additional Information ER Service Contracted by VESTS 4- 1) NON HAZ GROUNDWATER 2) NON HAZ SOILS Tuck H107152								
15. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.								
Generator's/Offor's Printed/Typed Name MICHAEL DIBELLO		Signature <i>[Signature]</i>		Month 07		Day 29		
				Year 15				
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____							
	Transporter signature (for exports only): _____ Date leaving U.S.: _____							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Shipment							
	Transporter 1 Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month 07		Day 29	
					Year 15			
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	18b. Alternate Facility (or Generator) Shipping Document Tracking Number: _____ U.S. EPA ID Number _____							
	Facility's Phone: _____							
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____							
19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)								
1.		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a								
Printed/Typed Name		Signature		Month		Day		
				Year				

GENERATOR / SHIPPER'S INITIAL COPY